# **APPENDIX 6**

# **Treatment Protocol [Evidence level III]**

'Wherever possible, medicines for children' [those aged less than 12 years] 'should be prescribed within the terms of the product licence. However, many children may require medicines not specifically licensed for paediatric use.' [BNF 41 March 2001 pp11-12] IM injections are painful for children and other options should be discussed with the local pharmacist. Other organisations are developing guidelines. If in doubt, consider discussing planned treatment with local pharmacist.

Condition / Infection	Suggested Treatment
Chlamydia	Child < 12 years: Erythromycin 12.5 mg/kg orally qds x 10 - 14 days (maximum dose 500 mg orally qds)
	Child > 12 years: Doxycycline 100 mg orally bd x 7 days
	or Erythromycin 500 mg orally qds x 7 days
	Erythromycin 500 mg orally bd x 14 days
	Azithromycin 1 g orally in a single dose
Trichomoniasis and	Child 1 - 3 years: Metronidazole 50 mg orally tds x 7 days
Bacterial Vaginosis	Child over 3 – under 7 years: Metronidazole 100 mg orally bd x 7 days
	Child over 7 – under 10 years: Metronidazole 100 mg orally tds x 7 days
	Child > 10 years: Metronidazole 400 mg orally bd x 7 days or
	Metronidazole 2 g orally in a single dose  Metronidazole gel 0.5% and clindamycin cream 2%, are not licensed for u in children.

Gonorrhoea	The choice of antibiotic will be dependent upon the geographical location of the source of the infection.
	Gonoccocal Ophthalmia Ceftriaxone 25-50mg/kg IV or IM as a single dose up to a maximum dose of 125mg or

Cefotaxime 100mg/kg IM as a single dose.

### Child < 2 years:

Amoxicillin 50 mg/kg/day orally in a single dose or Ceftriaxone 125mg intramuscularly in a single dose in children who weigh less than 45 Kg or

\*Spectinomycin 40 mg/kg intramuscularly in a single dose [unreliable in pharyngeal infection]

#### Child 2 - 12 years:

Amoxicillin 50 mg/kg/day orally in a single dose (maximum dose 2 g orally in a single dose) and Probenecid 500 mg orally in a single dose

or

Ceftriaxone 125mg intramuscularly in a single dose in children who weigh less than 45 Kg or

\*Spectinomycin 40 mg/kg intramuscularly in a single dose (maximum dose: 2 g) [unreliable in pharyngeal infection]

### Child > 12 years:

Amoxicillin 2 g orally in a single dose and Probenecid 1 g orally in a single dose

or

\*Spectinomycin 2 g intramuscularly in a single dose [unreliable in pharyngeal infection]

or

Ciprofloxacin 500 mg orally in a single dose if growth has ceased (although it has been used extensively in the treatment of pseudomonal infections in children with cystic fibrosis aged 5–17 years without adverse effects).

\*Spectinomycin and Probenecid are available on a named patient basis from:

IDIS Ltd World Medicines Millbank House 171-185 Ewell Road Surbiton, Surrey KT6 6AX

Tel: (020) 8410 0700 Fax: (020) 8410 0800 hospitals@idis.co.uk

Anogenital Warts	Observation period for minimum of 2 months unless symptoms of pain, bleeding or irritation.  Consider excision/electrosurgery/cryotherapy under general anaesthesia.  Other treatment modalities [eg podophyllotoxin, imiquimod] are not licensed for use in children. Further information should be sought.
Genital Herpes	First episode Treat if within 5 days of start of episode or while new lesions are still developing.  Child < 2 years:     Aciclovir 100 mg orally five times a day for 5 days  Child > 2 years:     Aciclovir 200 mg orally five times a day for 5 days  Recurrence If episodic or suppressive therapy is required see adult guideline.  Valaciclovir and famciclovir are not licensed for use in children.
Anogenital candidiasis	Child < 16 years: Clotrimazole cream 1% topical application 2 – 3 x daily Oral imidazoles are not recommended in this age group.

## **Congenital Syphilis**

IV Benzyl penicillin sodium 100,000 to 150,000 units/kg/day (50,000 units/kg every 8-12 hours) for 10 days.

Intramuscular (IM) Procaine penicillin G 50,000iu/kg [Jenacillin A 0.2ml/kg] daily in a single dose for 10 days up to a maximum daily dose of 750,000 units [Jenacillin A 3ml daily maximum]

Children should not be subjected to more than one IM Procaine penicillin G injection per day: IV Benzyl penicillin sodium treatment is the preferred option if there is necessity to divide the dose of procaine penicillin G.

Treatment is based on studies using procaine penicillin G which is available as Jenacillin A [3ml contains both procaine penicillin G 750 mg/750,000iu and benzylpenicillin sodium 300mg]. Although there are no studies on the use of Jenacillin A in the treatment of congenital or acquired syphilis, both types of penicillin in Jenacillin A are effective against congenital syphilis.

## Child < 12 years:

IV Benzyl penicillin sodium 200,000 to 300,000 units/kg/day (50,000 units/kg every 4-6 hours) for 10 days.

## **Acquired Syphilis**

IM Procaine penicillin G 50,000iu/kg [Jenacillin A 0.2ml/kg] daily in a single dose for 10 days up to a maximum daily dose of 750,000 units [Jenacillin A 3ml daily maximum]

#### Child > 12 years:

IV Benzyl penicillin sodium 200,000 to 300,000 units/kg/day (50,000 units/kg every 4-6 hours) for 10 days.

IM Procaine penicillin G 50,000iu/kg [Jenacillin A 0.2ml/kg] daily in a single dose for 10 days up to a maximum daily dose of 750,000 units [Jenacillin A 3ml daily maximum]

### Penicillin Allergy

Doxycycline 100mg orally bd x 14 days or Erythromycin 500mg orally qds x 14 days

Jenacillin A is available on a named patient basis from:

IDIS Ltd World Medicines

Millbank House

171-185 Ewell Road

Surbiton,

Surrey KT6 6AX

Tel: (020) 8410 0700 Fax: (020) 8410 0800 hospitals@idis.co.uk

Scabies	Malathion liquid 0.5% in aqueous base.  Apply over whole body [including face, neck, scalp and ears in children aged > 2 years]; wash off after 24 hours.  Do not use more than once per week for three consecutive weeks. Medical supervision of treatment required in children aged less than six months.  Permethrin 5% dermal cream  Apply over whole body [including face, neck, scalp and ears in children aged > 2 years]; wash off after 8 – 12 hours.  Do not use more than once a week for three consecutive weeks.  Medical supervision of treatment required in children aged two months to two years.
Pediculosis pubis	Malathion liquid 0.5% in aqueous base Apply over whole body, allow to dry naturally, wash off after 12 hours or overnight. Do not use more than once per week for two consecutive weeks. Medical supervision of treatment required in children aged less than six months.  Permethrin 5% dermal cream Apply over whole body, wash off after 12 hours or overnight. Do not use more than once per week for two consecutive weeks. Medical supervision of treatment required in children aged two months to two years.